

Results. The results of the study were distinguished by approaching a new vision of research in the field of esophagus anomalies and disorders in children, which allowed us to use these data in the diagnostic and medical-surgical treatment.

Conclusions. The theoretical importance of this work is the elucidation of etiopathogenesis and the evaluation of the anatomic-physiological, clinico-paraclinic features in the esophagus abnormalities and diseases in children. The results obtained will be used and will be presented as an informative basis in the process of developing the diagnostic algorithm and in estimating the risk factors for newborns, infants and children in esophageal abnormalities and diseases.

Key words: esophagus, diagnosis, complications, child, treatment

178. INTESTINAL MALROTATION IN CHILDREN

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Introduction. Surgery of congenital intestinal (duodenum) malrotation in children exists for almost 50 years, but only this decade it has been correctly codified as regards the intercurrent diagnoses, this possibility being strictly related to modern paraclinical assessment: ultrasounds, computed tomography scan, and other surgical technical possibilities.

Aim of the study. Estimating clinical and paraclinical features of both medical and surgical treatment peculiarities in intestinal malrotation in children.

Materials and methods. The paper was carried out in the clinic of the National Scientific and Practical Pediatric Surgery Centre N. Gheorghiu. The study includes the analysis of clinical and anamnestic data, prenatal and postnatal development data, environmental conditions, paraclinical tests, medical and surgical treatment in children with congenital malformations of small intestine, namely of duodenum.

Results. Following the surgical treatment, under endotracheal anesthesia, it has been managed to perform the adhesiolysis based on bont method and electrocoagulation. Evolution was simple. After the surgery, these children followed a conservative treatment. Having a good general condition, with primary cicatrization of wound, children have been discharged.

Conclusions. Presently, developing new criteria for congenital malrotation diagnosis remains an insufficiently studied issue in the pediatric surgery. Prenatal diagnosis in these duodenal malformative types has improved a lot of patients' forecasts. Management of surgical congenital disorders in children shows that currently duodenum anomalies in children continue to increase, due to little studied causes, with related complications that worsen both disease evolution and forecasts. Intestinal (duodenum) malrotation is a congenital anomaly due to disorder of rotation and fixing of duodenum, which interconnects the disorder of evacuomotor function of the duodenum and duodenostasis. The diagnostic algorithm of intestinal malrotation includes consecutive clinical manifestations, biological features, fibrogastroduodenoscopy, pH measurement, traditional lower gastrointestinal series and double-contrast barium enema, and three-dimensional duodenography by CT, peripheral ECG. Studies show that surgical treatment techniques in intestinal malrotation continue to be developed. The surgical treatment is adapted depending on the form of malformation, clinical and evolutionary stage of related complications.

Key words: malrotation, duodenum

179. THE ANALYSIS OF LATE POSTOPERATIVE COMPLICATIONS IN CHILDREN TREATED FOR HIRSCHSPRUNG DISEASE IN NEWBORN AND INFANT PERIODS